PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/538,202			ing Date 09/2005	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FIL	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A		]	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A	]	N/A		]	N/A	
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A	]	N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		1	x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *		1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE s	heets of papers \$250 (\$125) additional 50 to	ings exceed 100 tion size fee due y) for each on thereof. See 7 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						]			]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL	
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	07/14/2008	CLAIMS REMAINING AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 20	Minus	<b></b> 20	= 0	1	x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	3	= 0	1	x \$ =		OR	X \$210=	0
M	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
L		CLAIMS REMAININ AFTER AMENDME	IG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Z.	Total (37 CFR 1,16(i))	•	Minus		-	]	x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	***	-	]	x \$ =		OR	x \$ =	
Ш	Application Size Fee (37 CFR 1.16(s))					]			]		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 3.  "If the "Highest Number Previously Paid For" In THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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